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**FEE TRANSMITTAL  
for FY 2001**

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ ) 1,390.00

**Complete if Known**

Application Number	Not Yet Assigned
Filing Date	February 7, 2001
First Named Inventor	Joseph M. Cannon
Examiner Name	Not Yet Assigned
Group Art Unit	N/A
Attorney Docket No	Cannon 112-102

**METHOD OF PAYMENT**

- 1.
- ☒
- The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to

Deposit  
Account  
Number

12-2325

Deposit  
Account  
Name

Lucent Technologies, Inc.

- ☒
- Charge Any Additional
- 
- Fee Required Under
- 
- 37 CFR 1.16 and 1.17

☐ Applicant claims small  
entity status. See  
37 CFR 1.27

- 2.
- ☐
- Payment Enclosed

☐ Check ☐ Credit Card ☐ Money Order ☐ Other**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
101	710	201	355	Utility filing fee	710.00
106	320	206	160	Design filing fee	
107	490	207	245	Plant filing fee	
108	710	208	355	Reissue filing fee	
114	150	214	75	Provisional filing fee	

SUBTOTAL (1) (\$ ) 710.00

**2. EXTRA CLAIM FEES**

	Total Claims	Extra Claims	Fee from below	Fee Paid
	18	0	18.00	
Independent Claims	8	5	80.00	\$640.00
Multiple Dependent				

**Large Entity Small Entity**

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	80	202	40	Independent claims in excess of 3
104	270	204	135	Multiple dependent claim, if not paid
109	80	209	40	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ ) 640.00

\*\*or number previously paid, if greater, For Reissues, see above

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for ex parte reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	390	216	195	Extension for reply within second month	
117	890	217	445	Extension for reply within third month	
118	1,390	218	695	Extension for reply within fourth month	
128	1,890	228	945	Extension for reply within fifth month	
119	310	219	155	Notice of Appeal	
120	310	220	155	Filing a brief in support of an appeal	
121	270	221	135	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,240	241	620	Petition to revive - unintentional	
142	1,240	242	620	Utility issue fee (or reissue)	
143	440	243	220	Design issue fee	
144	600	244	300	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Processing fee under 37 CFR 1.17(q)	
126	180	126	180	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	40.00
146	710	246	355	Filing a submission after final rejection (37 CFR 1.129(a))	
149	710	249	355	For each additional invention to be examined (37 CFR 1.129(b))	
179	710	279	355	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	

Other fee (specify)

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ ) 40.00

**SUBMITTED BY**

Name (print/type) Thomas J. D'Amico

Registration No  
(Attorney/Agent)

28,371

**Complete (if applicable)**

Telephone (202) 828-2232

Signature

Date

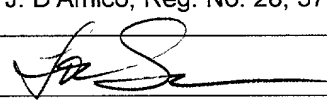
February 7, 2001

Please type a plus sign inside this box ☐

PTO/SB/21 (08-00)  
Approved for use through 10/31/2002. OMB 0651-0031  
U.S. Patent and Trademark Office: US. DEPARTMENT OF COMMERCE  
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<h1>TRANSMITTAL FORM</h1> <p>(to be used for all correspondence after initial filing)</p>	Application Number	Not Yet Assigned
	Filing Date	February 7, 2001
	First Named Inventor	Joseph M. Cannon
	Group Art Unit	N/A
	Examiner Name	Not Yet Assigned
Total Number of Pages in This Submission	Attorney Docket Number	Cannon 112-102

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input checked="" type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below)
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual Name	DICKSTEIN SHAPIRO MORIN & OSHINSKY LLP Thomas J. D'Amico, Reg. No. 28, 371
Signature	
Date	February 7, 2001

Please type a plus sign (+) inside this box ☐

PTO/SB/05 (08-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No. <b>Cannon 112-102</b>	
		First Named Inventor <b>Joseph M. Cannon</b>	
		Title <b>CORDLESS TELEPHONE ACTIVE-CALL ENABLED INTERCOM</b>	
		Express Mail Label No.	
<b>APPLICATION ELEMENTS</b> <small>See MPEP chapter 600 concerning utility patent application contents.</small>		<b>ADDRESS TO:</b> Assistant Commissioner for Patents Box Patent Application Washington, DC 20231	
1. <input type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original, and a duplicate for fee processing)</small>		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program <i>(Appendix)</i>	
2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i>	
3. <input checked="" type="checkbox"/> Specification [Total Pages <b>54</b> ] <small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none"><li>- Descriptive title of the invention</li><li>- Cross Reference to Related Applications</li><li>- Statement Regarding Fed sponsored R &amp; D</li><li>- Reference to sequence listing, a table, or a computer program listing appendix</li><li>- Background of the Invention</li><li>- Brief Summary of the Invention</li><li>- Brief Description of the Drawings <i>(if filed)</i></li><li>- Detailed Description</li><li>- Claim(s)</li><li>- Abstract of the Disclosure</li></ul>		a. <input type="checkbox"/> Computer Readable Form (CRF)	
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <b>13</b> ]		b. Specification Sequence Listing on <ul style="list-style-type: none"><li>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies), or</li><li>ii. <input type="checkbox"/> paper</li></ul>	
5. Oath or Declaration [Total Pages <b>5</b> ] <ul style="list-style-type: none"><li>a. <input checked="" type="checkbox"/> Newly executed (original or copy)</li><li>b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <small>(for continuation/division with Box 18 completed)</small><ul style="list-style-type: none"><li>i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)</small></li></ul></li></ul>		c. <input type="checkbox"/> Statements verifying identity of above copies	
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76		<b>ACCOMPANYING APPLICATIONS PARTS</b>	
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76		9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))	
<input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No. _____		10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of <small>(when there is an assignee)</small> Attorney	
Prior application information: Examiner _____ Group / Art Unit: _____		11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i>	
For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.		12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations	
<b>18. CORRESPONDENCE ADDRESS</b>		13. <input type="checkbox"/> Preliminary Amendment	
<input type="checkbox"/> Customer Number or Bar Code Label _____ or <input checked="" type="checkbox"/> Correspondence address below		14. <input type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small>	
Name <b>DICKSTEIN SHAPIRO MORIN &amp; OSHINSKY LLP</b> <b>Thomas J. D'Amico</b>		15. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small>	
Address <b>2101 L Street NW</b>		16. <input type="checkbox"/> Request and Certification under 35 U.S.C. 122 (b)(2)(B)(I) Applicant must attach form PTO/SB/35 or its equivalent	
City <b>Washington</b> State _____ Zip Code <b>20037-1526</b>		17. <input type="checkbox"/> Other _____	
Country _____ Telephone <b>(202) 785-9700</b> Fax <b>(202) 887-0689</b>			
Name (Print/Type) <b>Thomas J. D'Amico</b> Registration No. (Attorney/Agent) _____			
Signature _____ Date <b>February 7, 2001</b>			